# **Executive Summary**

The USG Mission in South Africa, on behalf of its partners, is pleased to submit a six-month progress report on implementation of the President's Emergency Plan for AIDS Relief (PEPFAR) in South Africa. This report covers activities during the period: October 1, 2004 through March 31, 2005. Although PEPFAR is technically in its second fiscal year, the program's partners are just over one year into program implementation, due to delays in fund appropriations and allocations. This report demonstrates that there have been remarkable achievements over the last six months. The USG Mission, its collaborators within the South African Government (SAG), and its many implementing partners, have made significant progress toward the goals and objectives laid out by both PEPFAR and the SAG Comprehensive Plan. The table below summarizes some of the specific results in the key program areas:

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Indicator	Direct	Indirect	Total
Prevention			
Number of pregnant women who received PMTCT services	46,812	196,848	243,660
Number of pregnant women who received a complete course of ARV prophylaxis in a PMTCT setting	7,873	30,000	37,873
Care			
Number of individuals provided with general HIV-related palliative care and support	194,393	357,105	551,498
Number of HIV-infected individuals who received clinical prophylaxis and/or treatment for TB	27,522	9,145	36,667
Number of OVC served by an OVC program	72,353	6,811	79,164
C&T			
Number of individuals who received counseling and testing	77,892	244,976	322,868
Treatment			
Number of individuals with HIV infection receiving ARVs	25,633	19,000	44,633

As noted in the table, the USG results are delineated in two categories: direct and indirect, as called for in the PEPFAR reporting guidelines. In July of last year, the Office of the Global AIDS Coordinator revised the guidance regarding strategic information. Although PEPFAR is primarily focused on service delivery, there was a need to better capture all the activities that play a supportive role in providing care and treatment services. For example, in a country with a less developed health system, USG funding supports infrastructure, salaries, and the procurement of supplies – components that make up direct service delivery. However, in other more developed countries, such as South Africa, USG funds are used to enhance the existing public health system and services. Activities of this nature could include activities such as developing logistics systems, quality assurance, and capacity building, all of which play a vital role in delivering services, but are not easily captured in service indicators like "number of people reached."

The official definitions of the categories are as follows:

#### **USG** direct support

Included in these accomplishments are individuals receiving care and treatment through service delivery sites/providers that are directly supported by USG programs (commodities and/or drugs and/or supplies and/or supervision and/or training and/or quality assurance, etc.) at the point of service delivery. An intervention or activity is considered to be a type of "direct support" if it can be associated with counts of uniquely identified individuals receiving care and/or support at a service delivery point benefiting from the intervention/activity.

#### **USG** indirect support

Estimates of individuals receiving prevention, care or treatment services as a result of the USG's *contribution* to national, regional, or local activities such as policy development; logistics; protocol or guideline development; advocacy; laboratory support; capacity building; etc. The indirect estimates included in this report have been compiled from various sources that include, but are not limited to, public presentations made at various meetings by DOH and other government and non-government program personnel. Therefore, having been drawn from different sources, these data may not exactly reflect data generated by the DOH and they have not been confirmed by the government.

#### Total USG support

As indirect is an estimate at a macro level, direct counts are subtracted from indirect estimates to ensure double counting does not exist.

Even though there are concrete definitions, as outlined above, some areas of ambiguity remain. The USG Mission and its implementing partners have been conservative when applying these definitions and used additional criteria, such as frequency of visits and access to unique patient records, when claiming direct service delivery. The general assumption behind all the counts included in this report, and more specifically with the indirect counts, is that PEPFAR-funded activities are contributing to service delivery, rather than attributing these numbers only to PEPFAR. In all cases, direct and indirect, the USG recognizes that our programs and partners always are contributing to service delivery in partnership with the South African Government and its implementing partners. None of these results can or should be attributed only to USG efforts and funding.

President's Emergency Plan for AIDS Relief - South Africa Mission FY2005 Semi-Annual Progress Report

# **All Indicators**

### A. Prevention

Indicator	Direct	Indirect
Prevention of Mother-to-Child Transmission		
Number of service outlets providing the minimum package of PMTCT services according to national or international standards	294	
Number of pregnant women provided with PMTCT services, including	46,812	196,848
counseling and testing, during the reporting period	,	
Number of pregnant women provided with a complete course of	7,873	30,000
antiretroviral prophylaxis in a PMTCT setting during the reporting period	,	,
Number of health workers newly trained or retrained in the provision of	3,424	
PMTCT services according to national or international standards	·	
Abstinence and Be Faithful		
Number of community outreach HIV/AIDS prevention programs that	1,267	
promote abstinence and/or being faithful		
Number of community outreach HIV/AIDS prevention programs that	98	
promote abstinence (subset of above)		
Number of mass media HIV/AIDS prevention programs that promote	5	
abstinence and/or being faithful		
Number of mass media HIV/AIDS prevention programs that promote	0	
abstinence (subset of above)		
Number of individuals reached with community outreach HIV/AIDS	4,256,614	
prevention programs that promote abstinence and/or being faithful		
Male	251,783	
Female	243,737	
Number of individuals reached with community outreach HIV/AIDS	25,646	
prevention programs that promote abstinence (subset of above)		
Male	5,887	
Female	15,965	
Estimated number of individuals reached with mass media HIV/AIDS	18,691,581	
prevention programs that promote abstinence and/or being faithful		
Estimated number of individuals reached with mass media HIV/AIDS	0	
prevention programs that promote abstinence (subset of above)		
Number of individuals trained to provide HIV/AIDS prevention programs	2,049	
that promote abstinence and/or being faithful		
Number of individuals trained to provide HIV/AIDS prevention	119	
programs that promote abstinence (subset of above)		
Medical Transmission/Blood Safety		
Number of service outlets/programs carrying out blood safety activities	27	
Number of individuals trained in blood safety	324	
Medical Transmission/Injection Safety		
Number of people trained in injection safety	24	
Other Prevention		
Number of community outreach HIV/AIDS prevention programs that are	206	
not focused on abstinence and/or being faithful	40	
Number of mass media HIV/AIDS prevention programs that are not	19	
focused on abstinence and/or being faithful	054	
Number of targeted condom service outlets	976	
Number of individuals reached with community outreach HIV/AIDS	751,245	
prevention programs that are not focused on abstinence and/or being		
faithful	40.71.4	
Male	48,514	

Ind	cator	Direct	Indirect
	Female	73,741	
	mated number of individuals reached with mass media HIV/AIDS rention programs that are not focused on abstinence and/or being aful	8,337,174	
Nur	nber of individuals trained to provide HIV/AIDS prevention programs	6,686	
that	are not focused on abstinence and/or being faithful		

# B. Care

Indicator	Direct	Indirect
Palliative Care: Basic Health Care and Support (excluding	ng TB/HIV)	
Number of service outlets/programs providing general HIV-related	676	
palliative care		
Number of service outlets/programs providing malaria care and/or	12	
referral for malaria care for HIV-infected clients (diagnosed or		
presumed) as part of general HIV-related palliative care (subset of		
above)		
Number of individuals provided with general HIV-related palliative care	194,393	357,105
during the reporting period		
Male	76,864	
Female	68,732	
Number of individuals trained to provide general HIV-related palliative	13,257	
care during the reporting period		
Palliative Care: TB/HIV		
Number of service outlets providing clinical prophylaxis and/or treatment	376	
for TB for HIV-infected individuals (diagnosed or presumed) according to		
national or international standards		
Number of HIV-infected individuals (diagnosed or presumed) who	27,522	9,145
received clinical prophylaxis and/or treatment for TB		
Male	9,672	
Female	13,642	
Number of individuals trained to provide clinical prophylaxis and/or	1,919	
treatment for TB to HIV-infected individuals (diagnosed or presumed)		
according to national or international standards		
Orphans and Vulnerable Children		
Number of OVC programs	260	
Number of OVC served by OVC programs during the reporting period	72,353	6,811
Male	2,535	
Female	2,284	
Number of providers/caretakers trained in caring for OVC	3,569	
Counseling and Testing		
Number of service outlets providing counseling and testing according to	835	
national or international standards		
Number of individuals who received counseling and testing, including the	77,892	244,976
provision of test results, during the reporting period	•	
Male	12,749	
Female	23,982	
Number of individuals trained in counseling and testing according to	5,987	
national or international standards	•	

# C. Treatment

Indicator	Direct	Indirect
HIV/AIDS Treatment/ARV Services		
Total number of service outlets providing treatment	140	
Total number of individuals receiving treatment	25,663	19,000
Males 0-14	685	
Females 0-14	628	
Pregnant females 0-14	0	
Males 15+	6,591	
Females 15+	13,652	
Pregnant Females 15+	144	
Total number of new individuals with advanced HIV infection receiving	11,346	
treatment		
Males 0-14	353	
Females 0-14	374	
Pregnant females 0-14	0	
Males 15+	3,150	
Females 15+	6,886	
Pregnant Females 15+	86	
Total number of health workers trained, according to national and/or	3,960	
international standards, in the provision of treatment		
Total Dollar amount spent on drugs	1,672,898	
Total # of ARV regimens purchased	10,289	
Total # of ARV regimens distributed	31,460	
Laboratory Infrastructure		_
Number of laboratories with capacity to perform HIV tests and CD4 tests	2	
and/or lymphocyte tests		
Number of individuals trained in the provision of lab-related activities	20	

# D. Other

Indicator	Direct	Indirect
Strategic Information		
Number of individuals trained in strategic information (includes M&E,	1,524	
surveillance, and/or HMIS)		
Policy analysis and system strengthening		
Number of HIV service outlets/programs provided with technical assistance	323	
or implementing programs related to policy and/or capacity building,		
including stigma and discrimination reduction programs		
Number of individuals trained in implementing programs related to policy	2,040	
and/or capacity building, including stigma and discrimination reduction		
programs		